SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

MAY 052018

| Amoun | Date: | Permit |
|---------|--------------------|--------------------|
| t Paid: | | |
| T TT | ^ \ | _ |
| 5-13 | いじ | 6 Q |
| 6 | 5 | A |
| | Amount Paid: \$175 | Amount Paid: \$175 |

ca

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

| | J | × | _ | | | | explain) | Other: (explain) | П | THE PROPERTY OF THE PROPERTY O |
|--|---|--|--|--|-----------------------|----------------------------------|---|--------------------------|--|--|
| | _ | × | - | den in skirkerings og general | | | Conditional Use: (explain) | Conditio | | Secretarial S |
| | | × | _ | The second secon | | | Special Use: (explain) | Special | | erctor Wasser Sayer -2-200 |
| | | | | and a few parts of the | 1 | KING OFFICE | F15.3/2 | 31 | .J | |
| 1608 | 127 | × | 7 | Eu wilden | Mars 1 | Alteration (specify) | ا≲ِا | 1 | A LIE INS | Hec'd for Issuance |
| |) | × | _ | | | | Accessory Building (specify) | 4 | | Municipal Use |
| |) | × | (| | | | Addition/Alteration (specify) | Additio | | |
| | _ | × | _ | amenter and the fact that the | | ite) | Mobile Home (manufactured date) | Mobile | | |
| American Artistantian Company | - | × | | □ cooking & food prep facilities) | <u>or</u> □ cooking 8 | ☐ sleeping quarters, <u>or</u> | Bunkhouse w/ (☐ sanitary, or | Bunkho | | |
| | _ | × | _ | | | rage | with Attached Garage | | | ☐ Commercial Use |
| |) | × | _ | | | | with (2 nd) Deck | | | |
| | _ | × | | | | | with a Deck | | | |
| |) | × | _ | | | | with (2 nd) Porch | | | |
| |) | × | _ | | | | with a Porch | | | ✓ Residential Use |
| | ~ | × | | | | | with Loft | | | |
| |) | × | | | | shack, etc.) | Residence (i.e. cabin, hunting shack, etc.) | Residen | | |
| | _ | × | | | | ture on property) | Principal Structure (first structure on property) | Principa | | |
| Square Footage | ons | Dimensions | | | .е | Proposed Structure | | | ≺ | Proposed Use |
| | Height: | 100 | | Width: | | Length: | | | jn. | Proposed Construction: |
| 6 | Height: | uqu. | H | Width: 40 | | Length: えり | for is relevant to it) | eing applied | permit b | Existing Structure: (if permit being applied for is relevant to it) |
| • - | | | | None | | | | rdaker | tou. | 1 |
| | | | et | | | | ☐ Foundation | | Property | £_ |
| - | *************************************** | ontract) | service o | ☐ Portable (w/service contract) | □ None | , | ☐ No Basement | siness on | Run a Business | |
| on) | Vaulted (min 200 gallon) | nulted (n | | ☐ Privy (Pit) or | | CARRIE | ☐ Basement | Relocate (existing bldg) | Relocate | |
| | n | cify Type | sts) Spe | Sanitary (Exists) Specify Type: | - 1 | | | on | ☐ Conversion | \$ 1000 |
| , wel | | Specify Type: | | - 1 | □ 2 | | | Addition/Alteration | Addition | Т |
| □ City | redefined and results of the | Charles of the Charles | ity | ☐ Municipal/City | □ 1 | ☐ Seasonal | □ 1-Story | ☐ New Construction | New Cor | 100 mm |
| Wate | em ? | What Type of Sewer/Sanitary System Is on the property? | What Type of er/Sanitary Sy on the propert | Sewe Is o | of bedrooms | Use | # of Stories and/or basement | ea Company | Project | of Completion * include donated time & |
| | | | | | | | | | | Vallo at Timo |
| _ | | | | | | | | | | ☐ Non-Shoreland |
| □ No | _ Yes | | feet | Distance Structure is from Shoreline: | Distance Stru | Pond or Flowage If yescontinue> | /2 Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue | ty/Land with | ls Prope | 1 |
| Present? | Floodplain Zone? | Floods | logi. | | | if yescontinue | Creek of Landward side of Floodplaints | noward side | reek or La | , |
| Are Wetland | Is Property in | ls Pri | line: | Structure is from Shoreline: | Distance Stru | an (incl. Intermittent) | iver, S | ty/Land with | S Prope | |
| | Acreage | | Lot Size | | E | Town,61: | N, Range W | | _ , Township | Section 2 |
| | | ion: | Subdivision: | Block(s) No. | Lot(s) No. | 1804 10 324 | Gov't Lat Lot(s) CS | GOV | 1/4 | 1/4, |
| Page(s) 623 | Page | 287 | Volume / | CO-ZWS | \$ \$ | 94-2-43-07-07 | (Use Tax Statement) 04- 5/7 | i | Legal Description: | PROJECT LOCATION LE |
| written Authorization Attached Yes No | Attached | · [| are/zip): | Agent walling Address (include thy/state/zip): | gent Walling Ac | | | olication on beh | Signing Ap | Authorized Agent: (Person Signing Application on behalf of Owner(s)) |
| | : | | i i | | | | | Smy | A STATE OF THE PARTY OF THE PAR | John John Market |
| | Plumber Phone: | | | | Plumber: | _ | Cont | | 113 | Contractor: |
| ell Phone: | Cell Phone: | | | į | 211 | City/State/Zip: | City/ | | | Address of Property: |
| | , | | | , | | • | \ | | W. | Mark II |
| ne: | Telephone: | - B | 1000 | | City | Address: | E | - 2 | | Owner's Name: |
| THE STATE TO THE | 7 a 🗇 |] p o | | N LIGE SPECIAL LIGE | CONDITIONAL LISE | DRIVY | | | 77 75 1 | TVDE OF DEBNAT DECITOR |

Owner(s): _____e Owners listed on the Deed All Ow FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES networking any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) and accuracy of all information I (we) arm (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which relying on this information I (we) arm (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the sonable time for the purpose of inspection. ir letter(s) of authorizat ny this application) Date

Authorized Agent:

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Date

15/16

| Hold For Sanitary: | Signature of Inspector: A Torty | Condition(s):Town; Committee or Board Conditions Attached? の に し し し し し し し し し し し し | Date of Inspection: S(1)/1/1 | Was Parcel Legally Created ☐ Yes ☐ N Was Proposed Building Site Delineated ☐ Yes ☐ N | - | hing Yes | 16-0099 | Issuance Information (County Use Only) Permit Denied (Date): | (9) Stake or Mark Proposed Location NOTICE: All Land Use Perm For The Construction Of New One 8 The local | other previously surveyed corner or marked by a licensed surveyor at the Prior to the placement or construction of a structure more than ten (10) fit one previously surveyed corner to the other previously surveyed corner, o marked by a licensed surveyor at the owner's expense. | Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum re | Setback to Septic Tank or Holding Tank | Setback from the East Lot Line Setback from the East Lot Line | Setback from the North Lot Line | Setback from the Centerline of Platted Road Setback from the Established Right-of-Way | Description | Please complete (1) (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) | | | | (4) Show: All EXIST: (5) Show: (*) Well (6) Show any (*): (*) Lake; (7) Show any (*): (*) Wetl | Show Location of: Show / Indicate: Show Location of (*): |
|------------------------------------|---------------------------------|---|------------------------------|--|---|---|----------------------|--|---|---|--|--|---|---------------------------------|---|-----------------------------|--|--|--|--|--|--|
| Hold For Affidavit: Hold For Fees: | Date of Approval: | In they need to be attrached.) | ected by: | | # | □ No Affidavit Required □ No Affidavit Attached | Permit Date: 5-17-16 | Sanitary Number: # of bedrooms: Sanitary Date: Reason for Denial: | Iction, Septic Tank (ST), Drain field (DF), Holding Tank (r from the Date of Issuance if Construction or Use has not : ALL Municipalities Are Required To Enforce The Uniform Ite or Federal agencies may also require permits. | hirty (30) feet from the minim Department by use of a corre | Feet Feet equired setback, the boun | Feet | (1) Feet 20% Slope Area on property \ \(\) Yes | Feet | Feet Setback from the Lake (ordinary high-water mark) (2.5) Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff | Measurement Description Mea | uing) Changes in plans must be approved by the Planning & Zoning Dept. sest point) | | | | All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) |
| | | | W.Z | | | □ Yes □ No □ Yes □ No | | | <u>all</u> (W). | be visible from or must be | eyed corner to the | Feet | □ No Feet | Feet | Feet Feet | Measurement | Zoning Dept | | | | | Ā |

SECONDLETED APPLICATION, TAX STATEMENT AND FEE TO:

Ø.

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

A Refund: Date: Amount Paid: 30 5-17-16 72/6 0

| OBCIDITATION OF (Explain) (CAPITATION A DEED MIT WILL BEGIN TIN DENAIT HES | | | | 7 | | | □ Bu | Commercial Use | | | Treside Cae | Bosidontial Iso | Re | 1.000 | | Proposed Construction: | Existing Structure: (if permit being applied for is relevant to it) | | Property | ☐ Run a Business |) 000 □ Conversion | | \ ^¢ | Value at Time of Completion * include donated time & (What are you applying for) material | Z Non-Shoreland | Shoreland — | *** | Section , Township | 1/4,1/4 | PROJECT Legal Description: | 2 | Spent: (Person | 20 | Judy Study Trom |
|--|----------------------------|------------------------|--|------------------------------|---------|--|-----------------------------------|----------------------|--|-------------|--|-----------------|---|---|--------|------------------------|---|---|--------------|------------------|----------------------------|---------------------|--|---|-----------------|--|--|--------------------|----------------------|---|------------------|----------------------------------|----------------|--|
| Other: (explain) | Conditional Use: (explain) | Special Use: (explain) | Accessory Building Addition/Aiteration | Accessory Building (specify) | 3 | Mobile Home (manufactured date) | Bunkhouse w/ (☐ sanitary, or ☐ | with Attached Garage | with (2 nd) Deck | with a Deck | with (2 nd) Porch | with Loft | Residence (i.e. cabin, hunting shack, etc.) | Principal Structure (first structure on property) | | | | | ☐ Foundation | on [| Basement | | n | an | | ☐ Is Property/Land within 1000 feet of Lake, Pond or | ☐ Is Property/Land within 300 feet of River, Stream (inclintermittent) Creek or Landward side of Floodplain? If yes—continue —▶ | 439, N, Range 7 W | Gov't Lot Lot(s) CSM | Legal Description: (Use Tax Statement) 04-0 | | Ashalf of Owner(s)) | R). | |
| | | | iteration (specify) | | | A Company of the Comp | □ sleeping quarters, or □ cooking | age | Little of the state of the stat | | A STATE OF THE STA | | hack, etc.) | Proposed Structure | | Length: 23 | Length: | - A A A A A A A A A A A A A A A A A A A | | None | | Year Round | Seasonal | Use pedrooms | | Pond or Flowage If yescontinue | yescontinue> Distance Structure | CABLÉ | C 1 | 012-2-43-07- | 608 Wet - 908 W/ | Agent Mailing A | ABLE WI S | HS650 KIGSTS Cint C |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | g & food prep facilities) (| | | | | | | | | width: 38 | | None | | w/servic | Privy (Pit) or Vaulted (mi | (New) Sanitary Spec | Municipal/City | What Type of Sewer/Sanitary System Is on the property? | - Carlotte | ructure is from Shoreline : | ructure is from Shoreline : | 101 31ZE | Block(s) No. | 64-002-5000 Columne | SAME AS A | Adress (include City/State/Zip): | 4821 | IE WI SHE |
| | , X | X | | - 1 | × × × × | × | x) | × | X) | x) | × : | × × | × | X) Footage | Square | Height: 20' | Height: | | dy. | ontract) | Vaulted (min 200 gallon) | Specify Type: | The state of the s | pe of ry System operty? | | □ Ves | Is Property in Are Wetlands Floodplain Zone? Present? | 2.53 | | | BOW Document: | Written Authorization | Plumber Phone: | 200 000 000 000 000 000 000 000 000 000 |

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Date

9-5-16

Owner(s): JULY S

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Sandbirent listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Address to send permit

| Hold | | Con | Dati | [ns] | 5 |]_ a | 5 | Per | Per | man | Prior othe Prior | Set | <u> </u> | Se Se | Se T | <u>ا چ</u> اچ | | | | | n a nagasajin n | | | | | | The Telephone Resign | | | = >, |
|---|---|--|-----------------------|-------------------------------------|---|---|--|--------------|--|---|--|--|----------|--|---------------------------------|--|-------------|--|--------|--|---|-----------------------------|----------------------------|--|--|--|--|--|--|-----------------------------------|
| Signature or inspector: Hold For Sanitary: | | Condition(s):Town, | Date of Inspection: | Inspection | as Prop | Granted by Yes | Is Pai Parcel Is Stru | Permit #: | Issuance Informa Permit Denied (Date): | ed by a li | to the plant of th | back to | tback f | tback f | tback f | tback I | | riease | D / | | | 1 | | ٠. | | | | | Andrew Marie | ie |
| Signature of inspe- | | T TOWN | pection | Record: | Was Josed B | d by Varia | cel a S in Com | 2 | nied (D | (9) | acement siy survey acement : | o Drair o Privy | rom th | rom th | rom th | from th | | (8) | } / | griggenesgenes/Processon (1964 - 1974) e 1974 (1975) | -alternatives on the second | or transfer more to be seen | Marin Marin | | | • | : | ₹ 265 | (3) (2) (1) (4) (3) (4) (4) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6 | ne box below: |
| | | | | é | Was Parcel Legally Created Was Proposed Building Site Delineated | Variance (B.O.A.) lo | Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming | 16-0100 | Issuance Information Permit Denied (Date): | Stak For | or constri ed corner or constru d corner t | Setback to Drain Field / 3/5 Setback to Privy (Portable, Composting) | e East | Setback from the South Lot Line Setback from the West Lot Line | Setback from the North Lot Line | Setback from the Centerline of Platted Road Setback from the Established Right-of-Way | De | (B) | | | | | - | And the State of t | - - | | | Show: Show | Show I Show I Show: | V-00 |
| 4 | 1 | nutree of | | 2 | Legally Site De | ě | dard Lo vnershi iformin | Į۶. | | e or N | uction of a for marke uction of a o the oth | ble, Co | lot Lin | t Lot Li | h of I | erline | Description |) – (/))acks: | | Y Sec | | | | | And the same of th | *** | | Show any (*): Show any (*): | Show Location of: Show / Indicate: Show Location of (Show: | aw or |
| Hold Fig. | | Ma Mm | | | Create | Case #: | 1120111-0011-0011-001 | | (County Use Only) | lark P | a structur ad by a lic a structur er previo | mpost | e e | ine ne | ine | of Plat Right | חכ | above (meas | | | | | | | | A Party of the Par | |); ;; | Show Location of: Show / Indicate: Show Location of (*): Show: | <u>Draw</u> or <u>Sketch</u> your |
| Hold For TBA: | | Conc | | | | 4 | ☐Yes (Da | | Use (| ropose All Land ion Of I | e within i ænsed su e more ti usly survi | ting) | | | | ted Ro | | ured t | | () V V V () | | | | | | | | | <u>.*</u> | your |
| Ä. | | nab Attache | | e- | Myes | | (Deed of Record) (Fused/Contiguo | | l light | id Loca I Use Pr New On The loc | en (10) fe rveyor at i ran ten (1 ryed corne | | | | | ad y | | to cont | 5 3 | | | | | | | | | (#(#)) Value | Nortl (*) D | roper |
| | | Committee or Board Conditions Attached? | | Coston | N S | | (Deed of Record) | | _ | ition(s ermits E e & Tw al Towr | et of the the owner 0) feet bu | | | | | | | te (1) – (7) above (prior to continuing) Setbacks: (measured to the closest point) | | | | | | | | | 1 | ke; (*) | Proposed Construction North (N) on Plot Plan (*) Driveway and (*) From the Constructures of the Constructure of the Construction of the Constructure of the Cons | Property (regardless |
| | | | Inspected by: | V my | | | Lot(s)) | Permit Date: | Sanitary Number: Reason for Denial: | of Nex | minimum r's expens t less thar flable by t | | B | 300 | ა | | Meas | point) | | 4 | N. | | | | | | (1) The state of t | River; | onstru n Plot I y and (Structu | ardless |
| Hold | | □Yes □ | ed by: | | | | | Date: | for Der | w Cons ne (1) ' y Dwell e, City, | required e. hthirty (3) he Depart | | | ^ | ۸ | | Measurement | | | en e | Sta Visited State of the State of the |] | | | | | | (*) Str (*) Stop | ction olan **) From tres on | |
| or Affi | | No -{ f | | | | | N O S | U3 | | tructic Year fro ing: AL | setback, t (0) feet fro tment by (| Feet | Feet | Feet | Feet | Feet | a | | | 18 | Ž S | £a.h | gā g | | | | 不 | eam/Ces over | ntage F | at you |
| Hold For Affidavit: | | No the | | | | □Pre | MA MA | 2 | | m the L Muni | he bound m the mii use of a co | | | | | | | | | | δ | O. | | | i | | T. |); (*) [reek; (20% | ropert | of what you are applying for) |
| | | y need | | | Vere Pr | viously es (1) | igation igation | 6 | | tic Tan Date of cipalitic | ary line for himum re hirected o | 2000 | levation | setbacl setbacl | etbac | Setbac | | | | - Complete C | 1 194.5 | | | | | | | or (*) P | lame F | dying f |
| | | to be a | | | operty | Grante Vo | Mitigation Required Mitigation Attached | | | k (ST), Issuan Iss Are F | om which quired se- compass f | טבנטמכע נס אויפוו | on of F | <pre>< from</pre> | k from | k from k from | | | | la como | to a non-manuscription is no analysis CHESTER | اند | | | | | | ond | rontag | or) |
| Hold | | No \neg (If \underline{No} they need to be attached.) | | | Were Property Lines Represented by Owner Was Property Surveyed | Previously Granted by Variance Ves CrNo | Exercise colleges in | | # | Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Pri NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwellin The local Town, Village, City, State or Federal agencies may also require permits. | dary line from which the setback must inimum required setback, the boundar cornvected compass from a known cornv | | oodpla | Setback from Wetland Setback from 20% Slope Area | the Ba | Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek | | Chang | | | | | | | | | 5 | (*) Well (W); (*) Septic rank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | e Road | <u> </u> |
| Hold For Fees: | | | | | eprese las Proj | riance | □ Yes | | of bedrooms: | ield (D nstruct d To En require | ack must boundar | | 3 | nd ope Ar | nk or E | ke (ord | Description | Changes in plans must be approv | 100 | W. W | | La Land | inumbil/The corpe " | M. 2007.11 | To a second seco | | | folding | | |
| 8. D | | | | | nted by perty S | (B.O.A.) | \$ \$ | | oms: | E). Holliion or I | be meası γ line froi γ within ! | | | 6 | Sluff | linary t | ption | ans mu | | | Walaya Baraka | HOLSE HOLSE | | | and the state of t | • | <u> </u> | Tank | t. 444 | |
| | | | | | Owne urveye | ₽ | | | | ding Ta | ared must n which t | | | | | iigh-wa reek | | st be a | | | | Committee - movements (A | erometa ar Stavalii, v. 11 | na sanggarakan | | | | (HT) ai | | |
| | | | Da | Zon | | Case #: | Affid Affid | | Sa | Ink (HT | st be visible the setbace of the pro- | | | | | iter ma | | | | | | | | | | | | | | |
| Date 0 | | | te of R | Zoning District Lakes Classifica | Wes _ | | avit Re avit Ati | | Sanitary Date: | <u>(P)</u> , <u>Privy (P)</u> , a egun. welling Code. | le from on lck must but sposed site | | | | | ark) | | d by # | | | | | | | | | | *) Privy (P) | | |
| Date of Approval: | | | Date of Re-Inspection | ing District es Classification | | | Affidavit Required Affidavit Attached | |)ate: | <u>/(P)</u> , a Code. | e previou e measur e of the st | | | | | | | e Plani | | | | | | | | | | V (P) | | |
|) Syali 5 | | | ction: | _ | | | □ Yes | | | T), Privy (P), and Well (W). egun. welling Code. | isly surve ed must b | Č | 3 | | | | Meas | ning & | | | | | | | | | | | | |
| 1/3/ | | | | 1008) | | | | | | <u>≡</u> (w). | Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more thanten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or retriable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be | 1 | ١ | | | | Measurement | ed by the Planning & Zoning Dept. | / | | | | | | | 2 | | | | 1 |
| 1 \ | | | | | □ | | ON ON | | | | e to the | Leet | Feet | Feet | Feet | Feet | t . | Dept. | | ganger (| ene. | | | | | | | | | |

SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

MAY 12 2016

Date: Permit #: Amount Paid: 5-17-16 6-00 0

Bayliaki Co. Zoning Dept.

Refund:

| | _ | × | | | | | plain) | Other: (explain) | | |
|--|------------------------------------|-------------------------------------|---|---|--------------------|-------------------------|--|---|------------------------------|---|
| | _ | × | - | | | | Conditional Use: (explain) | Conditiona | idi otdi | Secretaria |
| | - | > | | | | | e: (explain) | Special Use: (explain) | 1 | |
| | - | < | | | | | | | -1-70 | įs. |
| | | | | | | | | | | |
| | | × | _ | | 6 | teration (specify) | Accessory Building Addition/Alteration (specify) | Accessory | | ante de la constitue de la cons |
| | ~ | × | - | | | | Building (specify) | Accessory Building | BOLLANGE | |
| - XC | <u></u> | - / > | | りたとう | けてのこ | ENINE WI | Alteration (specity) | 1 | | |
| 7 045 | ĩ | | | 3 | ٠ | 76.4 | | NICONIE NO | 1 | |
| | | × | 1 | () () () () () () () () () () | 0.000 miles | ol colonia damage | co) (consideration of date | NA SECUL | | |
| | _ | $_{	imes} $ | ties) | cooking & food prep facilities) | r Cooking & | sleening quarters or | Bunkhouse w/ (sanitary or | Bunkhous | _ | |
| | _ | × | _ | | | 1ge | with Attached Garage | | Ф | Commercial Use |
| errennennerrerdelt vor den militatelskaletelskerdeltelskaletelskaletelskaletelskaletelskaletelskaletelskaletel |) | × | | | | | with (2 nd) Deck | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | | × | | | | | with a Deck | | | |
| | - | : > | - | | | | with (2) Porch | | | |
| | - | < ; | - | | | | with a rout | | | |
| | _ | × | - | | | | with a Dorch | | | Residential Use |
| | - | × | _ | | | | with Loft | | | • |
| | _ | × | _ | | | hack, etc.) | Residence (i.e. cabin, hunting shack, etc.) | Residence | | |
| |) | × | _ | | | ure on property) | Principal Structure (first structure on property) | Principal S | | |
| Square Footage | sions | Dimensions | | | | Proposed Structure | _ | | ٠, | Proposed Use |
| 1 >75.7 | | | ** | avieti: | ** | | | | On: | Proposed Construction: |
| 1,5 story | Height: | | T | - 0 | - I | 40 | is relevant to it) | ng applied for | f permit bei | Existing Structure: (if permit being applied for is relevant to it) |
| | | | | None | | | | | | |
| | | | ioller | Compost somet | | | Foundation | | rioperty | |
| | | COULLACT | W/service (| Compost Tailet | Z ROILE | | | ness on | bronerty | |
| | fillil 200 Sail | aniced | 01 | | | | | existing bidg) | neiocate (existing plag) | |
| (F) | Vaulted (min 200 gallon) | anited y | ··· . | Drivy (Dit) Or |] [| | Bacomont | | Delocate (a) | り 1000 1000 1000 1000 1000 1000 1000 10 |
| Well | No. L | ediy Type | | Canitary (Evint | - 1 | X Year Kound | | Alleration | X Addition/Alteration | |
| The city | | Nais Trans | | - 1 | - 1 | O'Seasonal | - ; * | וומכנוסוו | □ Mess construction | |
| | | | 50#4 |] Municipal | <u> </u> | | % 1_ctory | riction | Now Conc | |
| Water | χ? Y? | Type of tary System property? | What Type of Sewer/Sanitary Syste Is on the property? | Se | of bedrooms | Use | # of Stories and/or basement | q | Project | of Completion * include donated time & |
| | | | | | | | | | | Value at Time |
| | | | | | | | | | | Non-Shoreland |
| 7.No | XN0 | | feet | | | If yescontinue → | If ye | | | |
| | ☐ Yes | i | oreline : | cture is from Shoreline : | Distance Structure | or Flowage | ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage | //Land within | ੀs Propert। | ☐ Shoreland —▶ [|
| Are Wetlands Present? | ls Property in Floodplain Zone? | Floo | noreline : feet | cture is from Shoreline : | Distance Structure | Im (incl. Intermittent) | ☐ is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes.—continue —▶ | //Land within dward side of |] Is Propert Creek or Lar | |
| 140 | Ç | | | | | _ a_D/c | - | | | |
| 4 | Acreage | | Lot Size | | • | | N. Range / W | 4 | . Township | Section 2 |
| dge Addition CR 1340 | de River | 1 | Subdivision: | Block(s) No. | Lot(s) No. | A Vol & Page | Lot Lot(s) CSM | Gov't Lot | 1/4 | 1/4, |
| (s) | Page(s)_ | | | 5000 | 9 | 1 | (Use lax statement) 04- C | | Legal Description | |
| perty Ownership) | nent: (i.e. Pro | ed Docur | Recorded | P0 = 00 | 00 1 CC- 7 | MIN (23 digits) | | | | PROJECT |
| Written Authorization Attached □ Yes □ No | Written Attache | | y/State/Zip) | Agent Mailing Address (include City/State/2ip): | çent Mailing Adc | Agent Phone: Ag | | cation on behalf | n Signing Appli | Authorized Agent: {Person Signing Application on behalf of Owner(s}} |
| | | | | | N/, | -6696 | | | Spears | Wade S |
| Phone: | Plumber Phone: | | | | Plumber: | | Contra | | | Contractor: |
| 80-0176 | 715-580- | | | 18815 | , . | Cable, WI | , | Spruce C | S | Address of Property: |
| 715-798-3116 | | 12875 | П | able w | <u> </u> | 42855 Spruce | 425 | スキン | (p) | Ros + Karen |
| phone: | Telepho | | | ip: | City/s | g Address: | | 1 | | Owner's Name: |
| | BOA I | 1 | SDECIVI IISE | J | CONDITIONAL IICE | | IICE T SANITARY | - X - ∧ND lice | ESTED—₩ | TYDE OF DERMIT REOHESTED—> |

Address to send permit_

42855

Sprace

O.F

CAble,

845

8

Authorized Agent:

Dyges listed on the

must sign or letter(s) of authorization must accompany this application)

(If you

alf of the

letter of authorization must accompany this application)

Date

19/1/4

Date

79/16

Owner(s):

(If there are viultiple Own

FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

are (are) responsible for the detail and accuracy of all information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) are (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable tuple for the purpose of inspection.

SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

Rep p ca

X C)

BAYFIELD COUNTY, WISCONSIN

Dark Blump Base Wed S 1 2 2016

Date: Permit #: Amount Paid: からら 6 6

Refund:

£, N

2016

| | | × | _ | | | | plain) | Other: (explain) | | Cactarana | guerra |
|-------------------------|---|--|---|--|---------------------------|------------------------------------|--|--|----------------------|--|------------------------------|
| | _ | × | _ | Various de la company de la co | | | Conditional Use: (explain) | Condition | | 000000000000000000000000000000000000000 | No. All'Anion |
| | _ | × | | - Control of the cont | | | Special Use: (explain) | Special Us | | | |
| | | | | THE RESIDENCE OF THE PARTY OF T | | | | | 3 | | |
| | _ | × | \dagger | | (specify) | Alteration | Accessory Building Addition/Alteration (specify) | Accessory | | TEC C TO TOS | oning sorter |
| 080 | - - | 0C × 00 | | 17(Angel: - | ` [{] | 777 | Building (specity) | Accessory Building | 3 | | Seenoo |
| | - - | < > | - | | | | - | Addition/ | <u> </u> | Nunicipal Use | |
| | _ | < > | 1- | | | ate) | Wiobile Home (manufactured date) | Mobile HC | | | |
| | _ | < > | - | cooking & food prep facilities) | quarters, <u>or</u> ⊔ co | ☐ sleeping | Bunknouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ | Bunkhous | | | |
| | _ | < > | - | | P | rage | with Attached Garage | - | | - commercial Use | 7 |
| | _ | < × | _ | | | | with (2") Deck | | | | <u> </u> |
| | _ | < × | | | | | with a Deck | | | | |
| |) | × | _ | | | | with (2") Porch | | | | |
| | - | × | - | | | | with a Porch | | | Residential Use | |
| | _ | × | _ | | | | with Loft | | | | |
| | _ | × | _ | |) | shack, etc. | Residence (i.e. cabin, hunting shack, etc.) | Residence | | | |
| | _ | × | _ | | operty) | ture on pr | Principal Structure (first structure on property) | Principal S | | | |
| Square Footage | | Dimensions | | | Structure | Proposed Structure | | | < | Proposed Use | |
| 4 | Height: Z | He | | Width: 50 | 5 | Length: | | | | Proposed Construction: | Pro |
| | | He | | Width: | | Length: | ris relevant to it) | ng applied for | rmit bei | Existing Structure: (if permit being applied for is relevant to it) | Exi |
| | | | | None | | M | X PXT FIRME | | | | |
| 1 | | | et | ☐ Compost Toilet | | | Foundat | | Property | Pro | |
| <u> </u> | | ntract) | ervice co | None Portable (w/service contract) | | | □ No Basement | ☐ Run a Business on | n a Busi | □Ru | |
| 3 | Vaulted (min 200 gallon) | ulted (min | Vai | Privy (Pit) or | \vdash | | Basement | Relocate (existing bldg) | ocate (| | 1 |
| X | | ify Type: _ | ts) Spec | ☐ Sanitary (Exists) Specify Type: | L4 | X | ☐ 2-Story | 7 | ☐ Conversion | 30 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | (IV |
| ⊡ Wel | | Specify Type: _ | | □ (New) Sanitary | Year Round 🗆 2 | X Year | ☐ 1-Story + Loft | ☐ Addition/Alteration | dition/ | , | - |
| □ City | | | γ | ☐ Municipal/City | onal 1 | ☐ Seasonal | ☐ 1-Story | New Construction | w Cons | X Ne | 2 3 |
| Wate | a . | What Type of Sewer/Sanitary System Is on the property? | What Type of er/Sanitary Sys on the propert | # Work of Sewer bedrooms is or | | Use | # of Stories and/or basement | Ā | Project | Value at Time of Completion * include donated time & | of of |
| | | | *************************************** | | | | | | | ∀ Non-Shoreland | 4 |
| □ Yes | ∏ Yes | | ine : feet | Distance Structure is from Shoreline: | \ | Pond or Flowage If yes—continue | □ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue | //Land within | Property | onoreianu → □ Is | |
| Are Wetland Present? | | Is Property in Floodplain Zone? | ine : feet | Distance Structure is from Shoreline: | ļ . | itream (incl. Intermittent) | liver, S | ☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain? | Property k or Lan | 0 | |
| 8 | | (72 | × | NBC. | CABLE, | | N, Range W | V | , Township | Section 🖳 , | |
| | <u>a</u> | _ | Lot Size | | | J ₀ | اُدُ | 152 | : |) | |
| ARA 7 | est a | .14 | Subdivision: | Block(s) No. | Vol & Page L | CSM Vol | ا المارة المارة المارة | Gov't Lot | 1/4 | NW 1/4, NS | |
| | Page(s) | | Volume _ | 7020 | - 02 | ٠ \$ | | 4 | Legal Description: | LOCATION LESS | |
| / Ownership | Recorded Document: (i.e. Property Ownership | Document | tecorded | | | PIN: (23 digits) | PIN: | | | | 44 Y 1111 1141 1141 |
| norization | 22 _ | | te/Zip): | Agent Mailing Address (include City/State/Zip): | Agent Ma | Agent Phone: | | ication on behalf | gning Appli | Authorized Agent: (Person Signing Application on behalf of Owner(s)) | Aut |
| S pe: | Plumber Phone: | | | or)A | 803 | Contractor Phone: P | <u></u> | CONSTRUCTION | CON | Contractor: Sumys, & | \V _δ |
| 1-2050 | 6/2/669- | | | 17875 | , wise. | SAR FAR | 5 | CARGE UNION ARPORT | NS. | COT 75A. CABU | 6 |
| | Cell Phone: | | | | Ş | City/State/Zin: | City/ | | | 2 | 2 |
| 1-2515 | Telephone: 715/794-2515 | 5, 08. | 5 | CABE W | | Mailing Address: | n Maili | | 7 | Owner's Name: | Q |
| ER | A. OTHER | □ в.о.А. | LUSE | CONDITIONAL USE SPECIAL USE | | Y □ PRIVY | USE SANITARY | ☐ LAND USE | TED- | TYPE OF PERMIT REQUESTED- | 17. |
| | \ | | | | <u> </u> | AN | SUED TO APPLI | nty Zoning Dep L PERMITS HAV | MITTL AL | Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. | DO No |
| | ·a· | | į į | of. | Bayfield Co. Zoning Dept. | Bayfield | | until all fees a | be issued | INSTRUCTIONS: No permits will be issued until all fees are paid. | NSTR |

APPLICANT - PLEASE CO PLOT PLAN ON REVERSE SIDE

バスC、 らいきょ) Attach
Copy of Tax Statement
recently purchased the property send your Recorded Deed

Date

20

Č

Address to send permit 46445

JACKSON

K

B

CAR

220

npany this application)

(s) a letter of authorization

(If yo

Authorized Agent:

Owner(s):

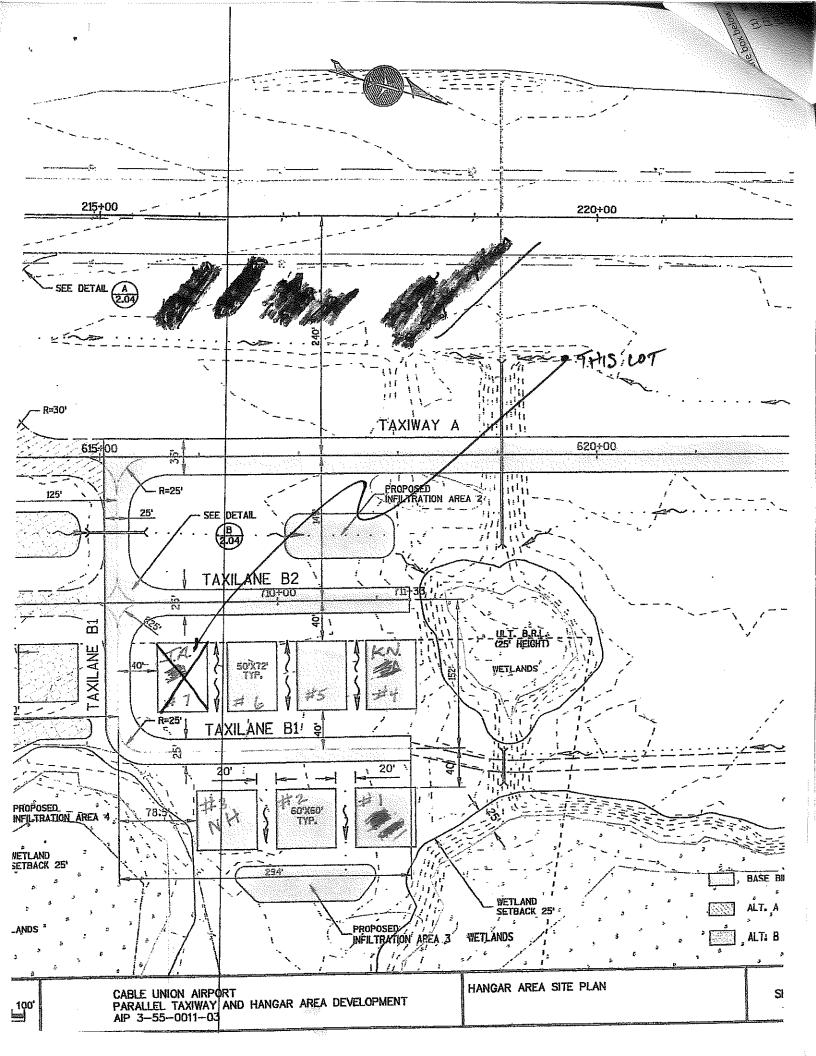
(If there are Multiple

ted on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) gor of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which of this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the purpose of inspection.

I (we) declare that this applicati am (are) responsible for the co-may be a result of Bayfield co-above described property a fan

| 품 | signature of Inspector: \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Not be Numan habitator | Ins Condition(s).Town, Committee or Board Conditions Attached? | Inspection Record: | Was Proposed Building Site Delineated X Yes | Granted by Variance (B.O.A.) ☐ Yes ☐ No Case # | Lot | Permit #: 116-0103 | Issuance Information (County Use Only) Permit Denied (Date): | NOTICE: All Land Us For The Construction Of New The | marked by a licensed surveyor at the owner's expense. (2) Stake or Mark Proposed I | rive to the placement of construction of a structure within ten (10) feet of the minimum required setback, the other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from | Setback to Privy (Portable, Composting) | Setback to Septic Tank or Holding Tank | Setback from the West Lot Line | Setback from the North Lot Line Setback from the South Lot Line | Setback from the Established Right-of-Way | Setback from the Centerline of Platted Road | (8) Setbacks: (measured to the closest point) | Please complete (1) - (7) above (prior to | | | | CONTRACT SEX | (1) Show Location of: (2) Show Location of (*): (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*): |
|---------------------|--|------------------------|---|--------------------|---|---|--|----------------------|--|---|---|---|--|--|---------------------------------------|---|--|---|--|---|------|-------|---|--------------|--|
| Hold For Affidavit: | | | Inspected by: Hall | | □ No | Previously Granted I | (Deed of Record) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Permit Date: 5-17-16 | y) Sanitary Number: Reason for Denial: | NOTICE: All Land Use Permits Expire One (1) Year from the Date of issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The local Town, Village, City, State or Federal agencies may also require permits. | or at the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the property expense. Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT) | 10) feet of the minimum required setback, the boundary line from which the setbor at the owner's expense. en (10) feet but less than thirty (30) feet from the minimum required costs of the | | | | Feet Setback from Wetland | Feet | Feet | he closest point) | continuing) | affa | e cod | ; | D SIRE PLAN | (1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show: (7) Show any (*): (8) Driveway and (*) Frontage Road (Name Frontage Road) (8) Show: (9) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Show any (*): (1) Show any (*): (2) Show Location of (*): (3) Show Location of (*): (4) Driveway and (*) Frontage Road (Name Frontage Road) (5) Show: (6) Show: (7) Show any (*): (8) Lake; (*) River; (*) Stream/Creek; or (*) Pond |
| Hold For Fees; | Date of Approval: | | Date of Re-Inspection: | Zonin | Were Property Lines Represented by Owner S Yes Was Property Surveyed N Yes | Previously Granted by Variance (B.O.A.) U Yes No Case #: | d □ Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | # of bedrooms: Sanitary Date: | e if Construction or Use has not begun. equired To Enforce The Uniform Dwelling Code. / also require permits. | | the setback must be measured must be visible from one previously surveyed comer to the | | Coupraii | 20% Slope Area on property ☐ Yes | Wetland | Setback from the River, Stream, Creek Setback from the Bank or Bluff | | Changes in plans must be approved by the Planning & Zoning Dept. | | | | | | ge Road) F); (*) Holding Tank (HT) and/or (*) Privy (P) |



SUBMIT: COMPLETED APPLICATION, TAX \$55500

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Statement | Secretarian | Property | Proper MAY 1 1 2016

Permit #: Date: Refund: Amount Paid:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
TO NOT STATE CONSTRUCTION I INTIL ALL DEPARTS HAVE REEN IS

Baylield Co. Zoning Dept.

| OBCIBIAII CIA |) | | a. Ž | Heo'd for Issuan | □ Municipal Use | • | | | Commercial Use | | | | Residential Use | | • | | Proposed Construction: | Existing Structure: (if permit being applied for is relevant to it) | | | Property | | 185,000 Conv | □ Addii | I | Value at Time of Completion * include donated time & | & Non-Shoreland | | ☐ Shoreland → ☐ Is Pri | | Section 23 , To | 1/4, | PROJECT Legal D | Authorized Agent: (Person Signing Application on behalf of Owner(s)) | Contractor: 6 Corgc | Address of Property: £42675 | BUND 8 |
|------------------|----------------------------|------------------------|---------|------------------|--------------------|---------------------|---------------------------------|--|----------------------|------------------------------|----------------------------|-------------------------------|-----------------|-------------|---|--------------------|------------------------|---|---|------|------------------|----------------------------|-------------------|-----------------------|--------------------|---|-----------------|-----------|---|-----|-----------------|--------------|--|--|--|--------------------------------|---------|
| - d | 111 | | : | | + | | M | B | | | | | | + | | 100 | | it being a | | 7 | □ kun a business | ☐ Relocate (existing bldg) | Conversion | ☐ Addition/Alteration | X New Construction | Project | | | operty/Landw | | Township | 1/4 | Nescriptio 1 | ng Applicati | 7.6 | e | . 6 |
| Other: (explain) | onditional | Special Use: (explain) | | ccessory B | Accessory Building | Addition/Alteration | lobile Hon | unkhouse | | | | | | Vesidence | incipal St | | | pplied for i | | | 9 -J | ing bldg) | | eration | ction | | | | and within and within | | 3 | Gov't Lot | Legal Description: (Use Tax Statement) | on on behalf o | 10/5/ | 000/21 | Ison |
| ain) | Conditional Use: (explain) | (explain) | | > l | | | Mobile Home (manufactured date) | Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or | with Attached Garage | with (2 nd) Deck | with a Deck | with (2 nd) Porch | with a Porch | with Inft | Principal Structure (first structure on property) | | | s relevant to it | | 1.1 | □ No Basement | A Basement | 2-Story | ☐ 1-Story + Loft | X 1-Story | # of Stories and/or basement | | | Creek or Landward side of Floodplain? If yes—continue — Is Property/Land within 1000 feet of Lake, Pond or Flowage | | N, Range 2 | te lotte | Statement) | f Owner(s)) | | 45% | 1 |
| | | | | tion/Alte | (specify) | (specify) | ıred date) | γ, <u>or</u> 🛘 s | ed Garag | eck | | orch | | III Briniii | t structu | Pr | | | | | nent | • | | | | eg ment | | If yes- | er, Stream If yes Ike, Pond i | | 8 |) CSM | 94- 94- 96-2-2-4 | Agent Phone: | 715798 | City/State/Zip: | N7585 |
| | ī | | | ration (sp | | | | leeping qua | e | | | | | ick, etc.) | e on prop | Proposed Structure | Length: | Length: | | | | | | Year Round | Seasonal | Use | | -continue | -continue -continue or Flowage | (% | Town of y | Vol & Page | PIN: (23 digits) 04-2-43-07- | one: | or Phone: / | O/Zip: | 588 |
| | | | | ecify) | | | | | | | | | | | erty) | ructure | | | | | | | | ₩. | , | | | | | 1 6 | 2 | Page | 7-23 | Ager | | 2 | 240 |
| | | | | | | | | ☐ cooking 8 | | | | | | | | | | | | | □ None | | 3 | 2 | ĺ | # of bedrooms | | | Distance Structure is from Shoreline: Distance Structure is from Shoreline: | | - | Lot(s) No. | 8 | Agent Mailing Address (Include City/State/Zip): | Plumber: | W; | 7 |
| | | | | A A A | | | | cooking & food prep facilities) | | | | | | | | | Width: | Width: | | : Ta | Por | Priv | Sani | □ (Ne | 1 8 | | | | icture is fr | - | | | -319-01800 | dress (finclu | 10 1 | 1 | MACO |
| | | | | | | | | facilities) | | | | | | | | | | | | 9 | Compost Toilet | Privy (Pit) or | Sanitary (Exists) | (New) Sanitary | Municipal/City | Sewe Is o | | | is from Shoreline : | 2 | | Błock(s) No. | | ide City/St | lumbia | N V | ENO MON |
| ~ | (| | | _ | | _ | • | | 1 | 1 | | | | | 1 36 | D | | | | ŗ | ervice coi | Vau | (5) | ry Specify | Ϋ́ | What Type of Sewer/Sanitary Syste Is on the property? | | _reer | feet line: | | Lot Size | Subdivision: | Recorded Do Volume | ate/Zip): | | , | à |
| × | × | × | - | × | × | × | × | Х | × | × | × | ×× | ۲, | Y | 3 3 | Dimensions | He | | - | | ntract) | 13 | ify Type: | ify Туре: _ | | pe of ry System operty? | | | Is Property Floodplain Z Floodplain Z | | | n: | Document | | | , | 8 |
|) | - |) | | _ |) |) | _ |) | _ | | _ - | - - | 1 | - - | _ | ' ਨੰ | Height: | Height: | | | | 1 200 gallo | NEW | | | | | 80 | Is Property in Floodplain Zone? | | Acreage | | : (i.e. Property Page(s) | Written A Attached | Plumber Phone: | Cell Phone: | 7.5% |
| | | | | | | | | | | | Advind dominary management | | | | 2088 | Square Footage | | | | | | (n) | L | _ Xwell | City | Water | | | Are Wetlands Present? | | 7 | | reument: (i.e. Property Ozgership) | Written Authorization Attached Yes No | Phone: | , ie | 7/5.235 |

Address to send permit 14/085

Birch

of the ov

r of auth

CABLE

S 484 Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Date

) Ye

Owner(s):

Deed All Owners

sign or letted(s) of authorization must accompany this application)

Authorized Agent:

X

Feet

Feet

5/12/16

المال

* 13 M

□ □ **□**